	DATEN							Rec	PG1/F	סוי	19 00	T-2004	_
FATENT APPLICATE FEE DETERMINATION RECORD Application or Docket Number													
CLAIMS AS FILED - PART I													
		CLAIMS	AS FILED		CHALL		- 7 4	. 4 / 3	U	•			
			(Colun	(Column 1)				SMALL I	ENTITY:	OR	OTHE	R THAN	
TC	TAL CLAIM	IS				(Column 2)			7—	٠ ٦	- SIREALI	L ENTITY	
FOR			NUMBER	FILED		MUMOCO		RATE	FEE	_	RATE	FEE	
TOTAL CHARGEABLE CLAIMS			 			NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	ase)
			4 n	# minus 20 = *				X \$ 9 =		OR	X \$ 18 =	1	_
INDEPENDENT CLAIMS				minus 3 =				X \$ 44 =		OR	X \$ 88 =	 	_
	LTIPLE DEPEN						1	+ \$ 150 =		OR	+ \$ 300 =	 	_
• If	the differenc	e in column 1	is less than ze	s less than zero, enter "0"				TOTAL	 	OR	TOTAL	acr	~
	(CLAIMS AS	AMENDE	AMENDED - PART II]		730	_
		(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	ÓR	OTHE	THAN	i
AMENDMENT A		CLAIMS REMAINING		HIGH	EST		1		ADDI-	7	SMALL	ENTITY	4
		AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL	
	Total	*	Minus	**	Oit	=		X \$ 9 =	FEE			FEE	1
MEN	Independent	*	Minus	***			-			OR	X \$ 18 =		1
1	FIRST PRESI	ENTATION OF	ON OF MULTIPLE DEPENDENT		0/ 4/44			X \$ 44 =		OR	X \$ 88 =		
			oerii ee ber	OEM EE DEFENDENT CLAIM				+ \$ 150 =		OR	+ \$ 300 =		1
		(Column 1)		10 .1			,	TOTAL ADDIT FEE		OR	TOTAL ADDIT. FEE		1
AMEND		CLAIMS		(Colum	ST	(Column 3)	г						
		REMAINING AFTER		NUMB PREVIOU	JSLY	P re sent Extra		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	l
	Total	AMENDMENT	100	PAID F	OR		·		FEE			FEE	l
		*	Minus			=		X \$ 9 =		OR	X \$ 18 =		
	Independent		Minus	***		=)	X \$ 44 =		OR	X \$ 88 =		
	FIRST PRESE	NTATION OF I	MULTIPLE DEP	ENDENT C	LAIM		+	\$ 150 =	•	OR -	+ \$ 300 =		
	!	Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE							
Т		(Column 1) CLAIMS	1	(Column		(Column 3)				_	NODII. FEEL		
ر		REMAINING AFTER		NUMBE PREVIOU	R	PRESENT		RATE	ADDI- TIONAL	Γ		ADDi-	
<u>.</u>		AMENDMENT		PAID FO		EXTRA			FEE		RATE	TIONAL FEE	
	Total ·	*	Minus	**		=	,	X \$ 9 =		OR :	X \$ 18 =		
	ndependent	•	Minus	***			X	\$ 44 =		OR :	× \$ 88 =		
f	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	\$ 1 50 =			\$ 300 =	1 1,5 . 2	:
					•			TOTAL		ຸ L	TOTAL		
if the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADD: If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20" order 720".											DDIT. FEE		
п	me riignesi Nun	nder Previously P.	aid For" IN THIS S id For" (Total or Inc	PACE is lace	than 'a	1 Amelou *2*							
			(· OIGH OF HA	rependent) I	o uve nig	nest number four	of in the	appropriate t	nmukoo ni xoo	1.		-	